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Return of Organization Exempt From Income Tax

OMB No 1545-0047 2010

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ The organization may have to use a copy of this return to satisfy state reporting requirements Α For the 2010 calendar year, or tax year beginning July 1 2010, and ending June 30 . 20 11 C Name of organization American Fed of Ts/4444 Kanawha Fed of Ts D Employer identification number Check if applicable Doing Business As 55-0663521 Address change Number and street (or P O box if mail is not delivered to street address) Boom/suite E Telephone number Name change 200 304-344-2679 1610 Washington St , East Initial return City or town, state or country, and ZIP + 4 ☐ Terminated G Gross receipts \$ 543,610 Charleston, WV 25311-2127 Amended return F Name and address of principal officer Fred Albert H(a) Is this a group return for affiliates? Yes No Application pending P.O Box 2722 Charleston, WV 25330 If "No," attach a list (see instructions) √ 501(c) (5)
√ (insert no)
√ 4947(a)(1) or 501(c)(3) Tax-exempt status H(c) Group exemption number Website: ▶ ☐ Association ✓ Other ► Union M State of legal domicile 1986 Corporation Trust Form of organization L Year of formation Part I Briefly describe the organization's mission or most significant activities. The mission of the organization is to improve the working conditions of the entity's members and their families; to give voice to their legitimate professional, economic Activities & Governance and social aspirations; and to strengthen the institutions in which our members work. Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 2 3 Number of voting members of the governing body (Part VI, line 1a) 3 16 Number of independent voting members of the governing body (Part VI, line 1b) 4 16 4 Total number of individuals employed in calendar year 2010 (Part V, line 2a) 5 0 Total number of volunteers (estimate if necessary) . . 6 10 0 Total unrelated business revenue from Part VIII, column (C), line 12 7a Net unrelated business taxable income from Form 990-T, line 34 0 Prior Year Current Year 517.858 Я Contributions and grants (Part VIII, line 1h) . 543.529 Program service revenue (Part VIII, line 2g) 0 9 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 10 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 685 71 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 518,553 543,610 12 2,400 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 1,500 13 Benefits paid to or for members (Part IX, column (A), line 4) 0 0 14 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0 0 Professional fundraising Tees (Part IX, Johnn (A), line 11e) .

Total fundraising expenses (Part IX, column (D) line 25) ▶ 0 0 16a b Other expenses (Part IX, column (A), lines 11a-12d, 11f-24f).

Total expenses Add Ines 12 12 (bus dequal Part X, column (A), Revenue less expenses Subtract line 18 from 166 12. 522,611 543,112 17 18 X, column (A), line 25) 524,111 545,512 -1,902 -5,558 19 End of Year Beginning of Current Year Total assets (Part X, line 167 20 94,930 21 Total liabilities (Part X, line 26) . . 0 22 96,832 94,930 Net assets or fund balances. Subtract line 21 from line 20 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of prepager (other than officer) is based on all information of which preparer has any knowledge Sign Here <u> DTEVEN</u> W Type or print name and title Print/Type preparer's name Preparer's signature Check 🔲 if Paid self-employed **Preparer** Firm's name Firm's EIN ▶ Use Only Firm's address ▶ Phone no May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No



Form **990** (2010)

Cat No 11282Y

UIIII 95	0 (2010)
Part	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission.
	The mission of the organization is to improve the working conditions of the entity's members and their families; to give voice
	to their legitimate professional, economic and social aspirations; and to strengthen the institutions in which our members work
-	Did the organization undertake any significant program services during the year which were not listed on the
2	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
•	services?
	If "Yes," describe these changes on Schedule O
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section
	501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to
	others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	Per capita was paid to attiliate organizations to further the working conditions of the organization's members and to represent
	members before the employer. This involves handling grievances and other employee concerns. The intent is to protect
	employee rights and dignity. Worksite by worksite outreach throughout the year to determine what issues concern the members
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$)
	Organizing potential members to join the union Worksites are visited to meet and develop relations with individuals
	who wish to join the union and become a part of the larger voice as well as to obtain the benefits that accrue to members through
	membership.
4c	(Code.) (Expenses \$ including grants of \$) (Revenue \$)
	Training of individual members in professional issues
	·····
	······································
4d	Other program services (Describe in Schedule O.)
40	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses >

art	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
_	complete Schedule A	2		-
2 3	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions) Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			-
3	candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	•	NA
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			<u> </u>
	assessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III		✓	
^	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have	5		
6	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		√
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	-	√
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi- endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.	10		•
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a		✓
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		✓
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11e		√
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		✓
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			,
20	If "Yes," complete Schedule G, Part III	19		/
20 a b		20a		Y
J	Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		NA

Part	Checklist of Required Schedules (continued)	_	W	T 11-
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations		Yes	No
	in the United States on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	•	1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		✓
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		1
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		WA
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		NA
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		√
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		1
35 a	Is any related organization a controlled entity within the meaning of section 512(b)(13)? Did the organization receive any payment from or engage in any transaction with a	35		✓
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
	related organization? If "Yes," complete Schedule R, Part V, line 2.	36		NA
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	√	

Form 99	· · · · · · · · · · · · · · · · · · ·			Page
Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V	<u>· · · </u>	Yes	
			105	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0	-		
	Litter the number of Forms W 20 metadod in line 14: Enter of in not applicable:	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			A / A
_	reportable gaming (gambling) winnings to prize winners?	1c		NA
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			1
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			16/
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	<u></u>	NA
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		√
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		NA
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		✓
b	If "Yes," enter the name of the foreign country	l		
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			l
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		NA
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a	✓	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	✓	
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		NI
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		NF
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		NA
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		NA
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		NA
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		NA
ĥ	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		NA
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		NO
9	Sponsoring organizations maintaining donor advised funds.		_	-
a	Did the organization make any taxable distributions under section 4966?	9a		NF
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		N/
10	Section 501(c)(7) organizations. Enter:			/*/
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		
11	Section 501(c)(12) organizations. Enter:	, ·	* □	
a	Gross income from members or shareholders			l
b	Gross income from other sources (Do not net amounts due or paid to other sources	1		l
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		NA
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . 12b			1
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	NA
a	Note. See the instructions for additional information the organization must report on Schedule O		— •	
b	Enter the amount of reserves the organization is required to maintain by the states in which		İ	
_	the organization is licensed to issue qualified health plans 13b	}		ļ

Did the organization receive any payments for indoor tanning services during the tax year?
If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

c Enter the amount of reserves on hand

14a

14b

13c

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to line 8a. 8b. or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year. . . 1b Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors or trustees, or key employees to a management company or other person? . . . 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 5 6 Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a **b** Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? . . Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. Q Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Nο 10a 10a Does the organization have local chapters, branches, or affiliates? If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?. 10b 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. 10 mg 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 Does the organization have a written whistleblower policy? . 13 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a 15b If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . 16a b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b List the states with which a copy of this Form 990 is required to be filed ▶ 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Another's website ✓ Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► Steve Shamblin, Treasurer 1610 Washington S , E #200 Charleston, WV 25311

	•	•	
Form	990	(2010)	

Page 7

Rart VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order, individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.								, or trustee.		
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average hours per week (describe hours for related organizations in Schedule O)	Individual tru	Institutional trustee	Officer	Key employee	Highest compensated at employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(1) Fred Albert, President P O Box 2722 Charleston, WV 25330	10			1				0	0	0
(2) Cynthia Phillips, Vice-President		<u> </u>		٧						
831 Main St Charleston, WV 25302	10			1				0	0	0
(3) Steve Shamblin, Treasurer				_		├─	 	1		
1613 Franklin Ave , #3 Charleston, Wv 25311	10			1				0	0	0
(4) Liz Riggall, Secretary			-	Ť						
248 Sunset Dr Charleston, WV 25301	5	ļ		1				0	0	0
(5) Meg Britt, E-Bd Director 237 Henson Ave S Charleston, WV 25303	2	1						0	0	0
(6) Jennifer Cavender-McNeal, E-Bd Director P.O Box 742 East Bank, WV 25067	2	1						0	0	0
(7) Greg Dodd, E-Bd Director 835 Somerset Dr. Charleston, WV 25302	2	1		_				0	0	0
(8) Sarah Kendall, E-Bd Director 187 A Rutledge Rd Charleston, WV 25311	- 2	1					-	0	0	0
(9) Ellen Shapiro, E-Bd Director 4009 Kanawha Turnpike, Apt 8#, S Charleston,	2	1						0	0	0
(10) Pat Snead, E-Bd Director 1111 Highland Rd Charleston, WV 25302	2	1						0	0	0
(11) Chris Sheppard, E-Bd Director 918 Red Oak St. Charleston, WV 25302	2	1						0	0	0
(12) Patty Akers, E-Bd Director 1111 Meadow Way Cross Lanes, WV 25313	2	/						0	o	0
(13) Veronica Coleman, E-Bd Director 12 Charlo Acres Hurricane, WV 25526	2	✓						0	0	0
(14) Jama Shamblin, E-Bd Director 1013 Shawnee Trail Elkview, WV 25071	2	1						0	0	0
(15) Debbie Stollings, E-Bd Director 428 Seneca Dr Charleston, WV 25302	2	1						0	0	0
(16) Gene Petry, E-Bd Director 708 Viewmont Dr. Charleston, WV 25302	2	1						0	0	0

,Rart	VII Section A. Officers, Directors, Trus	stees, Key	Emplo	уе	es, a	and	Highe	est	Compensated	Employees (continu	ied)	
	(A)	(B)			(0	C)			(D)	(E)		(F	
	Name and title	Average	Posit	on (d	checl	k all 1	that ap	ply)	Reportable	Reportable compensation from		Estim	
		hours per week	악	Ins	윺	Ğ.	e J	ο̈́	compensation from	related	irom	oth	
		(describe	Individual trustee or director	ŝ	Officer	Key employee	ples	Former	the	organization		compe	
		hours for	ct a	g	, i	ᇫ	/ee		organization	(W-2/1099-MI	SC)	from	
		related organizations	7 5	alt		ye	ğ		(W-2/1099-MISC)		1	organi and re	
		ın Schedule	tee	Institutional trustee		"	Highest compensated employee					organiz	
		O)		ě			ted						
(17)			 	_		_							
3:::/													
(18)													
33.77		[
(19)													
3552		1					ĺ						
(20)													
32		1			ļ								
(21)													
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(22)													
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(26)													
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(27)		-	İ										
				 				1			-		
(28)		-											
	Sub-total	L	J	<u> </u>		<u> </u>	L	<u> </u>	0		0		0
1b c	Total from continuation sheets to Part	VII Section		•	•		•	_	0		0		0
-	Total (add lines 1b and 1c)	vii, ocodio	~				•	•	0	├	0		0
2	Total number of individuals (including but	t not limited	to th	1086	· liei	· ted	above	-) w	the received m	ore than \$10	0 000	ın	
-	reportable compensation from the organi			1030	, 110	ica	above	J) **	mo received m	ore man pro	0,000		
											-	1	Yes No
3	Did the organization list any former of	fficer, direc	ctor c	or tr	uste	ee,	key e	emp	oloyee, or high	nest comper	sated		
	employee on line 1a? If "Yes," complete	Schedule J	for s	uch	ınd	ivid	uaĺ					3	1
4	For any individual listed on line 1a, is the	sum of re	porta	ble	con	npe	nsatio	n a	and other comp	ensation fro	m the		
	organization and related organizations												
	ındıvıdual											4	✓
5	Did any person listed on line 1a receive of	or accrue c	ompe	nsa	tion	fro	m any	ur ur	related organi	zation or indi	vidual		
	for services rendered to the organization	? If "Yes," (comp	lete	Scl	hed	ule J 1	for s	such person			5	✓
Section	n B. Independent Contractors									~ ~~~			
1	Complete this table for your five highest	compensat	ted in	dep	end	lent	contr	act	ors that receive	ed more than	\$100,	,000 of	
	compensation from the organization.							,					
	(A)	luana							(B) Description of s		,	(C) Compensa	tion
	Name and business add	iress						1_	Description of s	services		Jonnpensa	шон
None								-					
								_					
								┢					
								┼					
	Total number of independent contractor	ors (includi	na hi	ıt r	not	hmi	ted to) th	nose listed ab	ove) who			-
2	received more than \$100,000 in compens								ioso iisted ab	3.0, 1110			
				<u></u>									

Part	VIII	Statement of Revenue					
	_			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ıts	1a	Federated campaigns 1a	0				
Contributions, gifts, grants and other similar amounts	b	•	43,229				
	С	Fundraising events 1c	0				
gift	d	Related organizations . 1d	0				
i is,	е	Government grants (contributions) 1e	0				,
itio er s	f	All other contributions, gifts, grants,					
ribu		and similar amounts not included above 1f	300				}
ont	g	Noncash contributions included in lines 1a-1f \$	0				
$\overline{}$	h	Total. Add lines 1a–1f	Code	543,529			
Program Service Revenue	20		Code	0			
eve.	2a b			- 0			
Se F	C						
Ř	ď						
u Š	e						
grar	f	All other program service revenue .					
Pro	g	Total. Add lines 2a–2f	. ▶			l 	
	3	Investment income (including dividends, inter-					
		and other similar amounts) .	▶	10			10
	4	Income from investment of tax-exempt bond procee	ds▶	0			
	5	Royaltres	. ▶	0			
		(i) Real (ii) Perso	onal				
	6a	Gross Rents					
	b	Less. rental expenses					
	С	Rental income or (loss)					
	d	Net rental income or (loss)	>	0			· · · · · · · · · · · · · · · · · · ·
	7a	Gross amount from sales of (i) Securities (ii) Oth	er				
		assets other than inventory					
	b	Less cost or other basis					
		and sales expenses .					
	C	Gain or (loss)			·		
	d	Net gain or (loss)	. ▶	0		-	
<u>e</u>	g _a	Gross income from fundraising					
evenue	Oa	events (not including \$					
ě		of contributions reported on line 1c)					
F		See Part IV, line 18 a					
Other	ь	Less direct expenses b					
0		Net income or (loss) from fundraising events	. ▶	0			
		Gross income from gaming activities.					
		See Part IV, line 19 a	1				
	b	Less direct expenses b					
	С	Net income or (loss) from gaming activities .	•	0			
	10a	Gross sales of inventory, less					
		returns and allowances a					
	b	Less: cost of goods sold b					
	С	Net income or (loss) from sales of inventory .	•	0			
	<u> </u>	Miscellaneous Revenue Business					
	11a	Miscellaneous Income 90009	99	71	71		
	b			0		***	· · · · · · · · · · · · · · · · · · ·
	٦ C	All other revenue .		0			
	d e	Total. Add lines 11a–11d	. ▶	71			
	12	Total revenue. See instructions		543,610	71	0	10

Rart IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 6b, lb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21.	1,000			
2	Grants and other assistance to individuals in				
3	the U.S See Part IV, line 22 Grants and other assistance to governments,	1,400			
_	organizations, and individuals outside the				
4	U.S. See Part IV, lines 15 and 16	0			
5	Compensation of current officers, directors, trustees, and key employees	0			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	0			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	o			
9	Other employee benefits	0			
10	Payroll taxes	0			
11	Fees for services (non-employees)	0			
a b	Management	0			
c	Accounting	0			
d	Lobbying	0			
е	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	0			
g	Other	0			
12	Advertising and promotion	0			
13	Office expenses	96 0			
14	Information technology	0			
15 16	Royalties	0			
17	Travel	0			
18	Payments of travel or entertainment expenses			-	
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings .	1,287			
20	Interest	0			
21	Payments to affiliates	541,282			
22	Depreciation, depletion, and amortization .	0			
23	Insurance	50			
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If				
	line 24f amount exceeds 10% of line 25, column				
	(A) amount, list line 24f expenses on Schedule O.)				, ,
а	Good & Welfare	397			
b		0			
C		0			
d		0			 -
e		0			
f	All other expenses Total functional expenses. Add lines 1 through 24f	0 397			
25 26	Joint costs. Check here ▶ ☐ if following	397		ļ	-
20	SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational				
	campaign and fundraising solicitation	545,512			

, P	art X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	58	1	125
	2	Savings and temporary cash investments	96,774	2	94,805
	3	Pledges and grants receivable, net	0	3	
	4	Accounts receivable, net	0	4	0
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees Complete Part II of			
		Schedule L	0	5	0
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary			}
		employees' beneficiary organizations (see instructions)			
Assets	_	· ·	0		0
	7	Notes and loans receivable, net	0		0
	8	Inventories for sale or use	0	-	0
	10a	Land, buildings, and equipment, cost or		-	·····
	IUa	other basis. Complete Part VI of Schedule D 10a 0			
	b	Less accumulated depreciation . 10b 0	0	10c	0
	11	Investments—publicly traded securities	0	11	0
	12	Investments—other securities. See Part IV, line 11	0		0
	13	Investments – program-related. See Part IV, line 11	0	<u> </u>	0
	14	Intangible assets	0		0
	15	Other assets. See Part IV, line 11	0	<u> </u>	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	96,832		94,930
	17	Accounts payable and accrued expenses	0	L +	0
	18 19	Grants payable	0		0
	20	Tax-exempt bond liabilities	0		0
w	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0	 -	0
Liabilities	22	Payables to current and former officers, directors, trustees, key			}
Ē		employees, highest compensated employees, and disqualified persons			
Lia		Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties .	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities Complete Part X of Schedule D	. 0	25	0
	26	Total liabilities. Add lines 17 through 25	0	26	0
ses		Organizations that follow SFAS 117, check here ▶ ✓ and complete lines 27 through 29, and lines 33 and 34.			
auc	27	Unrestricted net assets	96,774	27	94,805
Bal	28	Temporarily restricted net assets	58	28	125
5	29	Permanently restricted net assets	0	29	0
Net Assets or Fund Balanc		Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34.	.*1		
ts c	30	Capital stock or trust principal, or current funds	0	30	0
Se	31	Paid-in or capital surplus, or land, building, or equipment fund	0	31	0
t As	32	Retained earnings, endowment, accumulated income, or other funds .	0		0
Š	33	Total net assets or fund balances	96,832		94,930
	34	Total liabilities and net assets/fund balances	96,832	34	94,930

, Pari	Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI			. 👝
1	Total revenue (must equal Part VIII, column (A), line 12)			43,610
2	Total expenses (must equal Part IX, column (A), line 25)		. 5	45.512
3	Revenue less expenses. Subtract line 2 from line 1			-1,902
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))			96,832
5	Other changes in net assets or fund balances (explain in Schedule O)	<u> </u>		0
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,			04.020
Part	column (B)) 6 XII Financial Statements and Reporting			94,930
T all t	Check if Schedule O contains a response to any question in this Part XII			. 🗆
			Yes	No
1	Accounting method used to prepare the Form 990.	ın		
	Schedule O.			لببا
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2		1
b	Were the organization's financial statements audited by an independent accountant?	· —	b	✓
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign of the audit, review, or compilation of its financial statements and selection of an independent accountant		c	1
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O.	ın ,		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year we issued on a separate basis, consolidated basis, or both.	ere		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			_[]
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth the Single Audit Act and OMB Circular A-133?	in 3	а	NA
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo to required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	the 3	b	NA
			orm 99	0 (2010)

SCHÈDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

Inspection If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

	ons that have filed Form 5768 (election ur ons that have NOT filed Form 5768 (electi			
	Yes," to Form 990, Part IV, line 5 (Prox			
	organizations Complete Part III			
Name of organization			Employer ide	ntification number
American Fed of Teachers/#44	a) an in a partie = 507	55-0663521		
	the organization is exempt un			organization.
•	of the organization's direct and indir	rect political campa	aign activities in Part IV	£
2 Political expenditures		• •		·
3 Volunteer hours .		•		
Part I-B Complete if	the organization is exempt un	der section 501(c)(3).	
	ny excise tax incurred by the organiz		11 7000	5
	ny excise tax incurred by organization			
_	urred a section 4955 tax, did it file F	orm 4720 for this y	ear?	. Yes No
4a Was a correction mad				Yes No
b If "Yes," describe in F	the organization is exempt un	dor poetion E01/	a) avant partian 501	1(0)(3)
	ctly expended by the filing organi			1(0)(0).
activities			• §	
	ne filing organization's funds contri	buted to other ord	· · · · · · · · · · · · · · · · · · ·	
527 exempt function ac				3
3 Total exempt function	expenditures Add lines 1 and 2	2 Enter here and	on Form 1120-POL,	***************************************
line 17b			▶ \$	S
4 Did the filing organization	on file Form 1120-POL for this year'			🗌 Yes 📗 No
5 Enter the names, addre	esses and employer identification nu	mber (EIN) of all se	ection 527 political organi	zations to which the filing
organization made pay	ments For each organization listed,	enter the amount p	paid from the filing organ	ization's funds. Also enter
the amount of political	contributions received that were pro ed fund or a political action committe	omptly and directly	delivered to a separate p	oolitical organization, such
as a separate segregate	id fund or a political action committee	ee (PAC). II addition	Tai space is fleeded, provi	The information in Part IV.
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
			funds If none, enter -0-	promptly and directly
				delivered to a separate political organization. If
				none, enter -0-
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

	_
Dage	"

	section 501(h)).	anization is exempt u		c)(3) and filed	l Form 5768 (ele	ction under
	Check ► ☐ if the filing organiz					
3 (Check ▶ ☐ If the filing organiz			provisions a	pply.	
		s on Lobbying Expendit			(a) Filing	(b) Affiliated
	•	tures" means amounts			organization's totals	group totals
16	, , ,					
ı	b Total lobbying expenditures to influence a legislative body (direct lobbying)					
(c Total lobbying expenditures (add lines 1a and 1b)					
•	d Other exempt purpose expenditures					
•	e Total exempt purpose expendi					
f Lobbying nontaxable amount Enter the amount from the following table in both columns.						
	If the amount on line 1e, column	(a) or (b) is: The lobbying	nontaxable amount is:			{
	Not over \$500,000	20% of the ar	nount on line 1e			
	Over \$500,000 but not over \$1,000	0,000 \$100,000 plus	15% of the excess over	\$500,000		
	Over \$1,000,000 but not over \$1,5	00,000 \$175,000 plus	10% of the excess over	\$1,000,000		
	Over \$1,500,000 but not over \$17,	000,000 \$225,000 plus	5% of the excess over	1,500,000		
	Over \$17,000,000	\$1,000,000				
9	g Grassroots nontaxable amount (enter 25% of line 1f)					
I	h Subtract line 1g from line 1a. If zero or less, enter -0					
i	i Subtract line 1f from line 1c. If	zero or less enter -0-				
					1	
j	. 10 11	han zero on either line	1h or line 1i, did the		file Form 4720	Yes No
	j If there is an amount other to reporting section 4911 tax for (Some organization	than zero on either line this year?	Period Under Section 501(h) election do not	n 501(h) have to com	olete all of the five	
	j If there is an amount other to reporting section 4911 tax for (Some organization column	than zero on either line this year?	Period Under Section 501(h) election do not ctions for lines 2a thr	n 501(h) have to compough 2f on pa	olete all of the five	
	j If there is an amount other to reporting section 4911 tax for (Some organization column	than zero on either line this year? 4-Year Averaging is that made a section 5 is below. See the instru-	Period Under Section 501(h) election do not ctions for lines 2a thr	n 501(h) have to compough 2f on pa	olete all of the five	
	j If there is an amount other to reporting section 4911 tax for (Some organization column) Calendar year (or fiscal year)	than zero on either line this year? 4-Year Averaging is that made a section 5 is below. See the instructional transfer of the section 5 is below. See the instructional transfer of the section 5 is below.	Period Under Section 501(h) election do not ctions for lines 2a three During 4-Year Avera	n 501(h) have to compough 2f on pa	plete all of the five	•
2	j If there is an amount other to reporting section 4911 tax for (Some organization column Calendar year (or fiscal year beginning in)	than zero on either line this year? 4-Year Averaging is that made a section 5 is below. See the instructional transfer of the section 5 is below. See the instructional transfer of the section 5 is below.	Period Under Section 501(h) election do not ctions for lines 2a three During 4-Year Avera	n 501(h) have to compough 2f on pa	plete all of the five	•
2	j if there is an amount other to reporting section 4911 tax for (Some organization column Calendar year (or fiscal year beginning in) Lobbying nontaxable amount b Lobbying ceiling amount	than zero on either line this year? 4-Year Averaging is that made a section 5 is below. See the instructional transfer of the section 5 is below. See the instructional transfer of the section 5 is below.	Period Under Section 501(h) election do not ctions for lines 2a three During 4-Year Avera	n 501(h) have to compough 2f on pa	plete all of the five	•
2	j If there is an amount other to reporting section 4911 tax for (Some organization column Calendar year (or fiscal year beginning in) Lobbying nontaxable amount (150% of line 2a, column (e))	than zero on either line this year?	Period Under Section 501(h) election do not ctions for lines 2a thr	n 501(h) have to compough 2f on pa	plete all of the five	•
2.	j If there is an amount other to reporting section 4911 tax for (Some organization column Calendar year (or fiscal year beginning in) Lobbying nontaxable amount (150% of line 2a, column (e)) Total lobbying expenditures	than zero on either line this year?	Period Under Section 501(h) election do not ctions for lines 2a thr	n 501(h) have to compough 2f on pa	plete all of the five	•

P.art	I-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	,		
		(a	a)	(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local			
	legislation, including any attempt to influence public opinion on a legislative matter or			
	referendum, through the use of			
а	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c C	Media advertisements?			
d e	Publications, or published or broadcast statements?		l	
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		ri	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities? If "Yes," describe in Part IV			
j	Total. Add lines 1c through 1i	L	ļļ	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912	•)	
c d	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 . If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Part		1(5)	or sec	ction
ı aı ı	501(c)(6).	,,•,, ,		
				Yes No
1	Were substantially all (90% or more) dues received nondeductible by members?			1 🗸
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2 🗸
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3 NA
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, l"Yes.")(5), d ine 3	or sec is an	ction swered
1	Dues, assessments and similar amounts from members		1	-
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts	of		
_	political expenses for which the section 527(f) tax was paid).			
а	Current year		2a	
b	Carryover from last year		2b	
С	Total		2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of		**	
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb	yıng		
E	and political expenditure next year?		5	
5 Par		•	5	<u> </u>
	lete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5;	and P	Part II-	B. line 1i. Also.
	ete this part for any additional information			_,

	m 990 or 990-EZ) 2010	Page 4
Part IV	Supplemental Information (continued)	
•		
		·

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2010

55-0663521

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Department of the Treasury Internal Revenue Service

Attach to Form 990 or 990-EZ.

American Federation of Teachers/#4444 Kanawha Federation of Teachers

Open to Public Inspection

OMB No 1545-0047

Internal Revenue Service

Name of the organization

Employer identification number

Part VI A 6 The entity has members who voluntarily join the organization
Part VI.A.7a The members of the organization elect the officers and board members through elections.
Part VI A 7b The members of the organization vote on changes to the local's constitution
Part VI.C.19 Governing documents are available through request Financial documents are also available upon request and are
reviewed at the entity's board meetings.
······································